



Critical Dynamics study of burnout in emergency department health professionals in New Brunswick: revisiting 5 years later.

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References

- Howlett M., et al. 2015. Burnout in emergency department healthcare professionals is associated with coping style: a cross-sectional survey. *Emerg Med J.* 32(9):722-7.



Link to all
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Background:

Our previous cross-sectional study found that different coping styles are associated with varying degrees of burnout in emergency department healthcare professionals (EDHPs), and that those who had worked longer in the same department had higher levels of burnout¹. In 2011, an urban referral ED had been newly renovated and received an influx of new staff. By 2016, ED crowding and staffing problems had become prevalent again. We assessed coping styles and burnout at these two time points to determine if burnout worsened over time.

Methods:

An anonymous survey of all EDHPs at an urban referral ED was performed in 2011 and in 2016. A demographics questionnaire, the Maslach Burnout Inventory (MBI: subscales emotional exhaustion, depersonalization and personal accomplishment), and the Coping Inventory for Stressful Situations (CISS: subscales task-oriented, emotion-oriented, and avoidance-oriented coping styles) were collected. Descriptive statistics and linear regression models examined relationships over time. Department exit interviews conducted with staff included questions on reasons for leaving.

Results:

Similar to our previous study¹, task-oriented coping was associated with less burnout, while emotion-oriented coping was associated with more burnout. Avoidance-oriented coping had no statistically significant effect on burnout. Burnout scores remained relatively consistent from 2011 to 2016; there was a small increase in depersonalization (8.9 to 11.4, p=0.02) and decrease in personal accomplishment (38.3 to 35.9, p=0.01). Nursing turnover attributable to burnout was 43%.

Association between coping styles and burnout (Correlation r values)

	Emotional exhaustion	Depersonalization	Personal accomplishment
Emotion-oriented	0.22 p<0.001	0.18 p<0.001	-0.18 p<0.001
Task-oriented	-	-	0.21 p<0.001
Avoidance-oriented	-	-	-

Aggregate MBI score (95% confidence interval)	2011	2016
Emotional Exhaustion	24.1 (21.8-26.4)	25.7 (23.2-28.2) (p=0.35)
Depersonalization	8.9 (7.6-10.2)	11.4 (9.9-12.9) (p=0.02)
Personal accomplishment	38.3 (37-39.6)	35.9 (34.6-37.2) (p=0.01)

Nursing staff turnover attributable to burnout from 2011 to 2016: 43%

Conclusion: In our previous cross-sectional study, those who had worked longer in the same department had higher levels of burnout¹. However, in our longitudinal study from 2011 to 2016, burnout only increased slightly. Interestingly, nursing staff turnover attributable to burnout during this same period was 43%, perhaps reflecting a small effect size. Although far from ideal, rapid staff turnover may represent a way these ED systems cope in a challenging environment. Task-oriented coping styles were associated with less burnout, while emotion-oriented coping styles were associated with more burnout, similar to our previous study¹.